

### RECEIVED FEB 0 1 2013

## State of South Dakota Campaign Finance Disclosure Statement

S.D. SEC. OF STATE

Full Name of Committee: South Dakotalampaign for Healt	by Families Ballor Question Committee
	)SDHealthy families.org
Committee Chair, Treasurer, Candidate E-Mall	De l'entry lateriffes. 34
4041 Brant Lake Hill Chaster SD 5701 Committee Street Address	6
PO Box 1484 Sioux Falls SD 57101-18 Committee Postal Address	484
Alisha Sedor 605 - 368 Name of Person Making Report Daytime Te	-17 <i>0</i> 8
Daytime le	lephone # Evening Telephone #
If Candidate Committee, please note office being sought, and District # (If applicable)	Political party affiliation (if any)
If Ballot Question Committee, Ballot Question number or letter.	Supporting?Qpposing?
Type of Campaign Statement:  Pre-Primary Pre-Convention Pre-General Mid-Year Year-	End Amendment Supplement Termination
VERIFICATION OF PERSON MAKING REPORT	County, municipal and school candidates file this statement with the person in charge of the local election.
print name legibly), certify that I have examined this eport and to the best of my knowledge and belief it strue, correct and complete. I also understand that ailure to timely file any statement, amendment, or correction required subjects the treasurer respon-	Statewide PACs, political party, ballot question and other committees file this statement with the Secretary of State's Office.
ible for filing to a civil penalty per day for each day hat the statement remains delinquent.	Secretary of State, Elections Department 500 East Capitol Ave., Ste 204 Pierre, SD 57501 or fax to 605-773-6580 or
Date Date of Treasurer	e-mail to cash@state.sd.us  Fax and e-mail images must contain the signature(s) and the original must be filed in our office within one week following the date the fax/e-mail was received.

### **INCOME**

### **Direct Contributions from Individuals**

Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space or you may attach additional sheets of paper.

Unitemized Contributi	ions from Individuals	Ai	nount
Enter total of all unitemized cor	ntributions (\$100 or less each from individuals) here:	\$	
			ne item A1
Itemized Contribution	ns from Individuals		
Enter all itemized contribution:	s (\$100 or more each from individuals) below:		
Name	Residential (Street) Address	A	mount
		\$	
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Itemized Contributions - Fr	nter total of all itemized contributions (\$100 or more each from individuals	): \$	

#### Direct Contributions from Organizations

An organization is defined as any corporate entity, partnership, association, club, labor union, or any group organized in a corporate form that is not defined as a political committee or political party. ONLY PAC's and Ballot Committee Questions may recieve direct contributions from organizations.

Name	Residential (Street) Address	Amou
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		\$ .
		\$
	s - Enter total of all <i>itemized</i> contributions from organizations:	\$

#### Direct Contributions from Political Parties

Name	Residential (Street) Address		Amount
		\$	•
		\$	•
		\$	
		\$	•
		\$	•
Enter total of all contribut	ions from Political Parties here:	\$ -	

Line item C1

## **Direct Contributions from In-State Political Action Committees**

Name	Residential (Street) Address		Amount
		\$	
		\$	
		\$	
		\$	•
		\$	
		\$	•
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		\$	
		\$	*
		\$	
Enter total of all contribution	ons from South Dakota Political Action Committees or South Dakota Candidate Co	mmittees here: \$	

Line item D1

### Direct Contributions from Out-of-State Political Action Committees

Name	Filing Web Address	Amount
		\$ •
		\$
		\$
		\$ •
		\$
		\$
		\$ •
		\$ •
		\$
Enter total of all contributi	ons from Federal Political Action Committees or Out-of-State Candidate Committees here:	\$

Line item D2

# **Direct Contributions from Candidate Committees**

Contributions from Candidate Committees			
Name	Residential (Street) Address		Amount
		\$	•
***		\$	
		S	•
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		\$	•
		\$	
		\$	•
		\$	
***		\$	•
		\$	•
Enter total of all contribution	ns from Candidate Committees here:	\$	

Line item E1

#### **In-Kind Contributions**

ion-cash contributions of good and services and the estimated fair market value				
Description	Name and residential address	Estimated va		
		\$		
		\$	•	
		\$		
		\$		
		\$	•	
		\$	•	
		\$	•	
		\$	•	
		\$	•	
		\$		
Enter total of all estimated in-kind co	ontributions here:	\$		

Line item F1

#### Other Income

Source of Income	Description of Income	Amount
		\$
		\$ •
		\$ •
Enter total of other income here:		\$

Line item G1

### **Establishing and Administering Committee/Solicitation Costs**

List a categorical description and the estimated value of funds or donations by any organization to its political committee for establishing and administering the political committee or solicitation costs of the political committee.

Organizational Name and Categorical Description for Direct Funds		Amount
	S	
	s	
	\$	-
Enter total here:	\$ .	

Line item H1

# **EXPENDITURES**

## **Operational Expenditures**

Categories have been provided for reporting common expenses. You may list other expense items at your discretion

Advertising  Consulting  Interest	\$		nount
N.A.	\$		
interest	\$		•
Postage	\$		
Printing	\$		•
Rent	\$		
Salaries	\$		-
Telephone	<del> </del>		<del></del>
Travel	\$		•
Utilities	\$		•
List other expense items below:	\$		•
Bank/Murchant Fus	\$	156	. <u>%</u>
2/11-1/11/11/11/11/11/11/11	\$	120	
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	\$		
nter total expenditures here:	\$	(56	

Line item X1

#### **Contributions Made to Candidates and Committees**

Name of Candidate or Committee		Amount
	\$	
	\$	•
	\$	•
	\$	•
	\$	•
	\$	,
	\$	•
	\$	•
	\$	•
	\$	*
	\$	
	\$	•
Enter total of contributions to candidates or committees here:	\$ -	

Line item X2

### **Debts and Obligations Owed by Committee**

All committee obligations which are incurred but unpaid at the end of the reporting period. If a service has been contracted but not billed, estimate the amount of the obligation.						
Owed to/Creditor's Name	Nature of obligation	Address		Amount		
			\$			
			\$			
			\$	+		
			\$			
Enter total debt owed by committee here:			\$			

Line item X3

#### **Loans Owed to Committee**

Report the amount of each loan owed to the political committee or political party. The amount of each loan made during the reporting period and the balance of each loan owed to the committee at the end of the reporting period must be itemized.

Name of recipient of loan, including address.	 ount of loan made Iring the reporting period	of loan repaid g the reporting period	Balance of loan at the end of the reporting period
	\$ *	\$	\$ •
	\$ •	\$	\$ •
	\$ •	\$	\$
Enter total amount of loans owed to committee here:	\$ •	\$ •	\$

Line item Y1

Line item Y2

Line item Y3

# **SUMMARY OF INCOME AND EXPENDITURES**

Balance of	\$2257 d		
		Credit	Debit
		Credit	Debit
	Candidate's Personal Contribution to Own Campaign	\$	
	Canada Ca		
Income:			
	Unitemized Contributions	s — .	
	Itemized Contributions	\$	
	Contributions from Candidate Committees	\$	
	Contributions from Organizations	\$	
	Contributions from Political Parties	\$	
	Contributions from In-State PACs	\$	
	Contributions from Out-of-State or Federal PACs	\$	
	In Kind Contributions	\$	
	Other Income	\$	
	Expenditures from an external source to establish a committee	\$	
Expenditures			
	Operational Expenditures		\$ 156 .50
	Contributions to Candidates and Committees		\$
	Debts and Obligations Owed by the Committee		<b>\$</b> — .
Loan Activity			
	Monetary loan made to Candidate or Committee during reporting period	\$	
	Monetary loan made to Candidate or Committee repaid during reporting period		\$
	Monetary loan made by Committee during reporting period		\$
	Monetary loan repaid to Committee during the reporting period	\$	
		1 2 1	
Am	nount on hand at the end of the reporting period:	\$ 2100	. 29

\*Note: You cannot end the reporting period with a negative balance.

County, municipal and school candidates file with the person in charge of the local election.